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COMMUNITY CARE ADVISORY COUNCIL

Annual Report to the Idaho Legislature for Year Ending December 31, 2017

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Background



The Community Care Advisory Council (CCAC) was formed by statutes (Idaho Code §39-3330, §39-3331, §39-3332, §39-3333, and §39-3511) passed in the 2005 legislative session. The statutes combine the former Board and Care Advisory Council and the Residential Care Council for the Elderly into a single entity of 20 members appointed by the organizations and/or agencies represented on the Council.

The Council is a forum for stakeholders in Residential Care or Assisted Living Facilities (RALFs) and Certified Family Homes (CFHs).

Assisted living facilities provide a humane, safe, and homelike living arrangement for adults who need some assistance with activities of daily living but do not require skilled nursing care. Residents of assisted living facilities in Idaho include individuals who are aged, have physical or developmental disabilities or mental illness.

Certified family homes provide a homelike alternative designed to allow individuals to remain in a more normal family-styled living environment, usually within their own community. Certified family homes provide a home to individuals who are elderly, individuals with a mental illness, developmental disabilities, physical disabilities or to those unable to live alone, and whose mental, emotional and physical condition can be met by the care provider to delay the need for more expensive congregate care or other institutional care.

The Purpose of the Council is as follows:

- To make policy recommendations regarding the coordination of licensing and enforcement standards in residential care/assisted living facilities and certified family homes as well as provision of services to residents in those settings.
- To advise the agency during development and revision of rules.
- To review and comment upon any proposed rules pertaining to residential care/ assisted living facilities or certified family homes.
- To submit an annual report to the legislature stating opinions and recommendations which would further the state's capability in addressing residential care/assisted living facility and certified family home issues.

Council Membership

The CCAC is comprised of assisted living and certified family home providers as well as advocates for individuals who are elderly or with developmental disabilities or mental illness and residents or family members of these two types of facilities. The Director of the Department of Health and Welfare or his designee also serves on the Council. In 2016, the Council elected to add a non-voting position, a Resident/Family Member-RALF. This member has provided valuable insight as an individual with a Developmental Disability and as a resident who plans to reside in an assisted living facility.

Below is a roster of Council members as of December 31, 2017:

| Selow | Below is a roster of Council members as of December 31, 2017: | | | | | | | |
|-------|---|----------------------------|--|--|--|--|--|--|
| | Position | Member | Organization | | | | | |
| 1 | DHW Director's Rep | Tamara Prisock | Department of Health and Welfare | | | | | |
| 2 | State Ombudsman | Cathy Hart | Idaho Commission on Aging | | | | | |
| 3 | Director, State Protection/Advocacy Representative | Angela Eandi | DisAbility Rights Idaho | | | | | |
| 4 | Director, Idaho Council on | Christine Pisani | Idaho Council on | | | | | |
| | Developmental Disabilities | Vice-Chair | Developmental Disabilities | | | | | |
| 5 | IHCA Executive Director Appointee | Kris Ellis | Idaho Health Care Association | | | | | |
| 6 | IHCA RALF Administrator | Charlene Pickering | Touchmark | | | | | |
| 7 | IHCA RALF Administrator | Nicole Ellis | The Cottages | | | | | |
| 8 | IHCA RALF Administrator | Steve Lish Chair | Discovery Care Center | | | | | |
| 9 | RALF Administrator At-Large | Keith Fletcher | Ashley Manor Assisted Living | | | | | |
| 10 | RALF Administrator At-Large | Jim Varnadoe | Overland Court Senior Living | | | | | |
| 11 | AARP Representative | Francoise Cleveland | AARP | | | | | |
| 12 | Advocate for Individuals with Mental Illness | Kathie Garrett | National Alliance on Mental Illness | | | | | |
| 13 | CFH Provider/Resident or Family Member | Wanda Warden | Certified Family Home | | | | | |
| 14 | CFH Provider | Eva Blecha | Certified Family Home | | | | | |
| 15 | CFH Provider | Pam Estes | Certified Family Home | | | | | |
| 16 | CFH Provider | Mary Blacker | Certified Family Home | | | | | |
| 17 | CFH Provider | Rebecca Solders | Certified Family Home | | | | | |
| 18 | Resident/Family Member - RALF | Elishia Smith | Trinity Assisted Living | | | | | |
| 19 | Resident/Family Member - RALF | Doug Park | Resident/Family Member | | | | | |
| 20 | Resident/Family Member - CFH | Leroy Smith | Resident/Family Member | | | | | |
| 21 | Resident/Family Member – RALF (non-voting member) | James Steed | Future Resident RALF | | | | | |

In 2017, the Council met on January 24th, April 25th, July 25th, and October 24th. Council meetings are open to the public.

Issues and Recommendations

Funding Issues

As reported in both the 2016 and 2017 Annual Reports, providers continue to express concern that negotiations with the Department of Health and Welfare's Division of Medicaid concerning outdated rates for Medicaid reimbursement have not resulted in increased rates. Reimbursement rates for services provided in Certified Family Homes are at rates that are almost 15 years old, personal care service rates in Residential Assisted Living Facilities are lower than what they were in 2009 and personal attendant rates are less than they were in 2009. Providers are concerned that as time has gone by, numerous supports for clients have been curtailed or eliminated and new burdens on providers have evolved. The Council continues to recommend there be a fresh look at the current operating environment to ensure that funding is adequate to safely care for residents according to established regulations and recent interpretations of such.



Placement of Individuals with Difficult Behaviors

Also included in last year's annual report, an issue that continues to exist in Idaho is the difficulty finding appropriate residential placements for individuals who exhibit difficult behaviors. Requirements for assisted living facility licenses or for certified family home certifications require those types of health care entities not admit or keep individuals who could potentially harm themselves or others. Most of the individuals are Medicaid recipients. Providers feel they do not receive sufficient Medicaid reimbursement to implement the supervision and services needed to effectively manage the difficult behaviors. This situation requires providers to either run a risk of losing their license if the resident harms him/herself or another resident or to discharge the resident, even when the resident has nowhere else to go. The Council recommended the Department explore ways to address the issue. The Division of Licensing and Certification worked with the Department of Health and Welfare's Divisions of Behavioral

Issues and Recommendations (cont.)

Health and Medicaid to develop a new residential treatment model for the state—Homes for Adult Residential Treatment (HART) for individuals with serious and persistent mental illness who are Medicaid participants and have a history of serious behaviors that make placement in traditional assisted living facilities or certified family homes difficult. The Division of Behavioral Health signed contracts with two facilities in Idaho to pilot the residential treatment model. Also, the Division of Licensing and Certification presented training about the licensing requirements related to Behavior Management to 400 facility management and staff members across Idaho to ensure providers had clear understanding of the requirements. The Council will continue to monitor this issue in 2018.

Emergency/Crisis Placement

Certified Family Home (CFH) providers who serve on the Council as well as other CFH providers who have attended Council meetings shared their difficulties with finding emergency placements when a resident in their care must relocate to another home. Reasons for relocation include escalating behavior of the resident that threatens other residents, medical needs that cannot be addressed by the current provider, or resident choice. Although the Department has developed a process for obtaining approval for emergency placements, it is difficult to find an emergency placement when an event occurs. The Council recommends the Department develop an accurate list of providers who are willing to take emergency placements that can be readily accessible to all providers who experience that need. In 2017, Certified Family Home Specialists in the Division of Licensing and Certification began to identify providers who are willing to take emergency placements by adding the question to the inspection checklist. A field was added to the program's database to collect and store the information from which the list can be generated. By the end of 2018, CFH Specialists will have collected the information necessary to generate the list. The Council will continue to monitor this issue in 2018.



Issues and Recommendations (cont.)

Memory Care/Secure Memory Units

Assisted Living Facilities and Certified Family Homes are experiencing increased numbers of residents with Alzheimer's or dementia. Caring for this population requires additional supervision, staff training, special programs, and enhanced building security measures. The Council recommends the Division of Licensing and Certification work with other agencies in researching memory care unit models and best practices.

Listening Sessions for Residents and Family Members

In 2017, the Council discussed ways it might be able to obtain more direct input from residents of assisted living facilities and certified family homes and their family members about the quality of care in Idaho facilities and ways that care can be improved through the partnership between the Department and providers. As stated earlier in the report, a sub-committee was formed to look at the possibility of developing a survey for this purpose. As that work continues, another idea that surfaced was the idea of holding listening sessions as a way of making it as easy as possible for residents and family members to share their input with the Council. The Council will develop a strategy and schedule for holding listening sessions in 2018.

2018 Council Priorities

- Listening Sessions for Residents and Family Members
- Resident Advocacy
- Memory Care/Secure Memory Units
- Emergency/Crisis Placement in Certified Family Homes for Individuals with Developmental Disabilities and Mental Illness
- Successful residential placements for individuals with mental illness or Alzheimer's/dementia
- Development of Additional On-line Resources for providers and the general public related to Certified Family Homes.

Residential Assisted Living Facilities

The following is information from the Department of Health and Welfare about surveys conducted

related to licensure of residential assisted living facilities.

Surveys Completed

| | 2013 | 2014 | 2015 | 2016 | 2017 |
|-------------------------------|------|------|------|------|--------|
| Number of Licensed Beds | 9056 | 9276 | 9721 | 9943 | 10,064 |
| Number of Buildings | 352 | 355 | 360 | 359 | 360 |
| Surveys Completed | | | | | |
| Initial Surveys | 24 | 23 | 12 | 15 | 27 |
| Licensure Surveys (Annual) | 57 | 89 | 38 | 97 | 115 |
| Follow-up Surveys | 22 | 33 | 39 | 33 | 29 |
| Complaint Investigations | 195 | 130 | 152 | 194 | 93 |
| Total Surveys Completed | 303 | 273 | 255 | 341 | 264 |
| Number of full-time Surveyors | 8 | 8 | 7.5 | 12.5 | 12.5 |

Note: The RALF program has 9 full-time surveyor positions. Starting in March 2016 and continuing in 2017, additional, temporary surveyors were hired and trained to address the backlog. There are currently 57 overdue licensure surveys.

Most Common Deficiencies Cited**

| Core Deficiencies | Times Cited 2014 | Times Cited 2015 | Times Cited 2016 | Times Cited 2017 |
|---|------------------------|------------------------|------------------------|------------------------|
| Inadequate Care Includes any of the Following: | | | | |
| Acceptable Admission/Retention Resident Rights Safe Living Environment Supervision Assistance-Monitoring of Medications Coordination of Outside Services Negotiated Service Agreement | 24 | 28 | 31 | 33 |
| No Administrator > 30 days | 3 | 3 | 3 | 3 |
| Abuse | 8 | 7 | 10 | 5 |
| Neglect | 5 | 4 | 5 | 2 |
| Exploitation | 1 | 1 | 1 | 2 |
| Surveyors Denied Access | 0 | 0 | 1 | 0 |

^{**} Note: Core deficiencies are defined by statute and involve abuse, neglect, exploitation, inadequate care, and other situations that risk the health and safety of the residents.

Residential Assisted Living Facilities (continued)

Most Common Deficiencies Cited (cont.)**

| Non-Core (Punch List) Deficiencies | Times Cited in 2014 | Times Cited in 2015 | Times Cited in 2016 | Times Cited in 2017 |
|--|---------------------------|---------------------------|---------------------------|---------------------------|
| RN assessment of health status | 52 | 53 | 59 | 60 |
| Negotiated Service Agreement | 26 | 27 | 50 | 63 |
| Investigate incidents, accidents, allegations and complaints | 31 | 41 | 50 | 45 |
| Current medication orders | 29 | 31 | 43 | 43 |
| Housekeeping and Maintenance | 23 | 26 | 40 | 26 |
| Notify Nurse of Change in Condition | 28 | 28 | 32 | 32 |
| RN assessments of Changes in Condition | 28 | 26 | 40 | 32 |
| RN presence and availability | 26 | 22 | 36 | 32 |
| Psychotropic Medication Reviews | 19 | 23 | 34 | 37 |
| Written Response to Complainant | 18 | 16 | 29 | 28 |
| Fire Safety Requirements | 25 | 21 | 22 | 41 |
| Fire Drills | 22 | 22 | 20 | 44 |
| Fire Alarm/Smoke Detector System | 18 | 16 | 16 | 32 |
| Behavior Management Plans | 26 | 26 | 19 | 22 |

^{**} A Non-core or "punch list" deficiency is a violation of the requirements established in Title 39, Chapter 33, Idaho Code and IDAPA 16.03.22 that doesn't meet the definition of a core deficiency.

Additional RALF Information

The Department of Health and Welfare received 129 complaints regarding assisted living facilities from January 1 – December 31, 2017. Of 199 allegations investigated, 58% were substantiated.

Enforcement

The Department of Health and Welfare is directed by statute to establish a number of enforcement remedies to apply to facilities who do not meet licensing requirements.

Enforcement actions are defined in IDAPA 16.03.22.900.

| Enforcement Action | 2013 | 2014 | 2015 | 2016 | 2017 |
|---------------------------|------|------|------|------|------|
| Provisional License | 12 | 7 | 9 | 19 | 13 |
| Required Consultant | 4 | 4 | 7 | 14 | 7 |
| Civil Monetary Penalties | 6 | 15 | 13 | 13 | 9 |
| Ban on Admissions | 5 | 1 | 6 | 9 | 11 |
| Revocation of License | 0 | 0 | 2 | 2 | 1 |
| Summary Suspension | 1 | 0 | 0 | 0 | 1 |
| Temporary Management | 0 | 0 | 1 | 1 | 2 |

Feedback on Surveyor Performance

After each survey, facilities are asked to provide the Department feedback on the survey process. For each question, facilities provide a score between 1 (unacceptable) and 5 (Excellent). Fifty-nine comment cards were submitted. Below are the average scores for each question.

| Question | Score |
|--|-------|
| Surveyors were knowledgeable of the IDAPA rules and the survey process | 4.5 |
| Surveyors communicated issues and rules in a clear, understandable manner | 4.5 |
| Surveyors were respectful when explaining issues and listening to facility staff | 4.6 |
| Surveyors took the time to answer questions | 4.7 |
| Survey staff was professional in their actions and appearance | 4.6 |
| Survey staff was helpful and directed us on where we could get additional help | 4.6 |

Certified Family Homes

The following is information from the Department of Health and Welfare about surveys conducted related to certification of certified family homes.



Surveys Completed

| | 2013 | 2014 | 2015 | 2016 | 2017 |
|---|------|------|------|------|------|
| Number of Certified Beds | 3025 | 3174 | 3295 | 3317 | 3409 |
| Number of Homes | 2196 | 2267 | 2357 | 2391 | 2447 |
| 24-Month Review | 1 | 20 | 1 | 39 | 39 |
| Desk Review | 300 | 243 | 72 | 251 | 176 |
| Follow-up Survey | 39 | 14 | 17 | 30 | 12 |
| Initial Surveys | 208 | 222 | 242 | 235 | 224 |
| Complaint Investigations | 79 | 71 | 111 | 62 | 81 |
| Home Inspections Completed Not Part of Initial or Annual Survey | 43 | 53 | 58 | 36 | 32 |
| Annual Surveys | 2041 | 1963 | 2149 | 2167 | 2193 |
| Total Surveys Completed | 2711 | 2586 | 2633 | 2820 | 2757 |

Most Common Deficiencies Cited

| Core Issue Deficiencies* | Times Cited in 2013 | Times Cited in 2014 | Times Cited in 2015 | Times Cited in 2016 | Times Cited in 2017 |
|--|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|
| Inadequate Care: Unacceptable Admission/Retention Violation of Resident Rights Unsafe Living Environment Failure to Provide Supervision No Assistance/Monitoring Meds No Coordination of Outside Services Plan of Service Not Met Failure to Provide First Aid/CPR Failure to Assist with ADLs | 269 | 326 | 184 | 131 | 129 |
| Inoperable Fire Detection/ Extinguishing Systems | 0 | 2 | 6 | 3 | 6 |
| Surveyors Denied Access | 2 | 1 | 1 | 2 | 5 |
| Abuse | 9 | 7 | 12 | 5 | 4 |
| Neglect | 2 | 1 | 4 | 3 | 4 |
| Exploitation | 0 | 2 | 5 | 0 | 2 |

^{*} Core issue deficiencies are defined at Section 39-3502(12), Idaho Code

Certified Family Homes (cont.)

Enforcement

| Non-Core Issue Deficiencies* | Times Cited in 2013 | Times Cited in 2014 | Times Cited in 2015 | Times Cited in 2016 | Times Cited in 2017 |
|---|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|
| Non-payment of certification fees for Certified Family Homes | 304 | 301 | 71 | 190 | 170 |
| Failed to maintain current certification in first aid and CPR | 63 | 54 | 31 | 16 | 30 |
| Failed to review emergency preparedness semi-annually | 45 | 59 | 27 | 22 | 28 |
| Failed to document annual review of resident rights | 9 | 11 | 8 | 14 | 27 |
| Failed to document fire drills | 35 | 49 | 39 | 25 | 19 |
| Failed to obtain and/or document required annual ongoing training | 50 | 41 | 39 | 7 | 18 |
| Failed to document quarterly examination of fire extinguishers | 29 | 41 | 32 | 16 | 18 |
| Failed to maintain current homeowner's or renter's insurance | 55 | 42 | 14 | 17 | 17 |
| Failed to document monthly smoke detector tests | 44 | 57 | 39 | 28 | 14 |

The Department of Health and Welfare is directed by statute to establish a number of enforcement remedies to apply to facilities who do not meet licensing requirements.

| Enforcement Actions | 2013 | 2014 | 2015 | 2016 | 2017 |
|------------------------|------|------|------|------|------|
| Provisional License | 61 | 47 | 66 | 26 | 17 |
| Ban on Admissions | 1 | 2 | 4 | 1 | 1 |
| Revocation | 22 | 25 | 16 | 14 | 17 |
| Summary Suspension | 2 | 2 | 1 | 0 | 1 |

Certified Family Homes (cont.)

Additional CFH Information

The Department of Health and Welfare received 101 complaints related to Certified Family Homes from January 1, 2017 – December 31, 2017, of which 28 complaints (or 32% of those already investigated) were substantiated.

- 25% were reported from family or friends
- 20% were reported from other healthcare providers
- 16% were reported from Adult Protective Services
- 13% were reported from Department staff
- 10% were reported from other sources
- 7% were reported from former or current staff
- 5% were reported from residents
- 4% were reported anonymously



Council Business Summary of Work Completed

January 2017

Presentations, Discussions, and Decisions:

- Presentation of the Homes for Adult Residential Treatment (HART) model by Ross Edmunds, Administrator of DHW's Division of Behavioral Health.
- Creation of a certified family home subcommittee to develop a checklist to help families choose a certified family home well-suited to meet their loved one's specific needs.
- Demonstration of the FLARES system for maintaining survey data for assisted living facilities. Demonstration was conducted by Jamie Simpson, Supervisor of the Residential Assisted Living Facilities Program.
- Finalized the Annual Report.
- Creation of a new sub-committee to develop ways to get more feedback from residents and family members related to the care provided in assisted living facilities.

April 2017

Presentations, Discussions, and Decisions:

- The Department updated the Council on the proposed rule changes for certified family homes and then solicited Council feedback about the proposed changes.
- Discussion concerning emergency placements in certified family homes.
- The Department updated the Council concerning the involuntary discharge process for assisted living facilities as well as efforts to identify secure memory units in the state.
- The Department provided an update to the Council concerning Homes for Adult Residential Treatment (HART), the establishment of a Secure Treatment Facility in Idaho, and a study being conducted by the Office of Performance Evaluation on the Department's Licensing and Certification Division.

July 2017

Presentations, Discussions, and Decisions:

- The Department continued the discussion about proposed rule changes for certified family homes and residential assisted living and then solicited additional Council feedback about the proposed changes.
- Steve Millward and Michael Case from DHW presented information about assessments for individuals with developmental disabilities.
- The Council discussed the behavior management requirements in the Residential Assisted Living Facilities rules.
- The Council discussed items to include in the annual report to the Legislature.

October 2017

Presentations, Discussions, and Decisions:

- The Council discussed the Behavior Management training the Department has been providing to assisted living facilities and scheduled a session for the Council to receive the training in November 2017.
- The Department continued the discussion about proposed rule changes for certified family homes and solicited additional Council feedback about the proposed changes.

- The Council discussed several proposals for changes to the Council by-laws, proposed by one of the Council members.
- The Council discussed the possibility of holding listening sessions to encourage residents and the family members of residents to provide input to the Council about things the Council could do to help facility improve services and communication.
- The Council discussed additional items to include in the Council's annual report to the Legislature.

